

APPLICATION FORM FOR HARDSHIP **PLANNING ADVANCE**
FROM THE UTAH STATE WATER QUALITY BOARD

Application Number: _____
(LEAVE BLANK-FOR STATE USE ONLY)

Preapplication Meeting Date: _____

PROJECT IDENTIFICATION AND DESCRIPTION

1. APPLICANT: _____
(Municipality, Sewer District, Special Improvement District, etc.)

Address: _____
City: _____ Zip Code: _____
EIN # _____
Phone: _____

2. PRESIDING OFFICIAL: _____
(Name and Title)

Address: _____
City: _____ Zip Code: _____
EIN # _____
Phone: _____

3. CONTACT PERSON: _____
(Name and Title)

4. TREASURER/RECORDER: _____
(Name and Title)

5. CONSULTING ENGINEER: _____
(Name and Title)

Name of Firm: _____
Address: _____
City: _____ Zip Code: _____
Phone: _____

6. CITY ATTORNEY: _____
(Name and Title)

Name of Firm: _____
Address: _____
City: _____ Zip Code: _____
Phone: _____

7. BOND COUNSEL: _____
(Name and Title)

Name of Firm: _____
Address: _____
City: _____ Zip Code: _____
Phone: _____

For the following questions please attach explanations on a separate sheet if adequate space is not provided on this form.

8. GENERAL PROJECT OVERVIEW

- A. Briefly describe the plan of study proposed: _____
- B. Estimated plan completion date: _____
- C. Estimated construction completion date: _____
- D. Position on the Utah Priority List #_____ List Date: _____
- E. Explain the financial hardship your community would experience if a planning advance is not provided to complete planning: _____
- F. What good faith efforts have been made to secure all or part of services and funds from other funding agencies? _____

9. COST ESTIMATED FOR PLANNING SERVICES:

- A. Consulting Engineer:\$ _____
- B. Other Consultants:\$ _____
- C. Administration:\$ _____
- D. Legal:\$ _____
- E. Other:\$ _____
- F. Other:\$ _____
- G. Other:\$ _____
- H. Other:\$ _____

TOTAL ESTIMATED COST.....\$ _____

(ATTACH COPIES OF DRAFT CONTRACTS)

10. SOURCES OF FUNDING (other than the WQB planning advance):

- A. Local Contribution\$ _____
- B. Other:\$ _____
- C. Other:\$ _____
- D. Other:\$ _____
- E. Other:\$ _____

TOTAL SOURCES OF FUNDING\$ _____

11. AMOUNT OF THIS APPLICATION:.....\$ _____

APPLICATION FOR
UTAH WATER QUALITY BOARD
PLANNING ADVANCE
PART II

If the applicant accepts a planning advance from the Water Quality Board Hardship Grant Program the following conditions apply:

1. The applicant must commit to complete the project plan in accordance with the approved plan of study.
2. Grant funds will be used only to pay for project costs as defined in R317-101-2 (D) of the Utah State Administrative Code.
3. The Water Quality Board will require the applicant to repay the planning advance to the Hardship Grant Fund at the time construction financing is secured.
4. All project funds will be deposited into a supervised escrow account of the applicant's choice. All disbursements from the account will be reviewed and approved by the applicant and the Division of Water Quality. Contractors and vendors will be paid directly from the account upon authorization.
5. Engineering planning services must be procured in accordance with rules defined in R33-5 of the Utah State Administrative Code.
6. Any increases to the original grant award must be authorized by the Water Quality Board. Costs incurred beyond the authorized amount or beyond the scope of work agreed to by the Water Quality Board shall be the sole responsibility of the applicant.
7. The applicant will designate a representative or representatives to assist their consultants and the State in coordinating design efforts with the community's governing board.
8. If the project is not proceeding in accordance with the agreed upon schedule the grant may be withdrawn and the applicant required to refund the planning advance.

I hereby certify that, to the best of my knowledge and belief, representations in this application are true and correct, the document has been duly authorized by the governing body of the applicant, and the applicant will comply with the terms, conditions and assurances if the planning advance is awarded.

Signature of person responsible for completion of this form:

Name & Title _____

Date signed